TOM SCHEDLER SECRETARY OF STATE

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5317 Administrative Services (225) 932-5314 Corporations (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

	4 hour processing	ney Order Enclosed Number:	
	Expiration	on Date:	
usiness Name (List <i>exactly</i> as it	appears in documents)		
lame of person filing document (e	evidence of filing will be mailed to this person, a	at address below)	
ddress			
ity	State	Zip Code	
	State Fax number	Zip Code Email address	
aytime phone number	Fax number quires all Louisiana notaries to prin	Email address	
	Fax number quires all Louisiana notaries to prin	Email address	ary or

State of Louisiana Secretary of State

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IMPORTANT NOTICE

The instructions from the Secretary of State's office in order to qualify a foreign corporation to do business in the state of Louisiana are the following:

- 1. The name must be identical to the name on certificate of existence or good standing from incorporating jurisdiction. The certificate must be dated within (90) ninety days of its submission. (In the states of Texas and Alabama, obtain a certificate of existence from the Secretary of State, not a good standing from the Comptroller/Department of Revenue.)
- 2. The name must be identical to the name on the certificate of fact evidencing the name change issued by the proper official of the incorporating jurisdiction.
- 3. The street address of the principal office of the corporation in the state or country under the laws of which it is incorporated.
- 4. The failure to include the federal taxpayer identification number of the corporation shall not invalidate nor cause the Secretary of State to reject the application.
- 5. The street address or intended street address of its principal business office wherever located. If you do not have one, write none in this space.
- If none, registered agent's address is deemed to be the principal business establishment.
- 7. This address shall be the street address of your registered agent if the agent is an individual or corporation.
- 8. The agent must be an individual resident in Louisiana, an individual attorney or a partnership which is authorized to practice law in Louisiana or a domestic or foreign corporation authorized to act as registered agent for other corporations.
- 9. To be completed only if the corporation proposes to limit its authority in Louisiana.
- 10. Attach addendum if needed for additional officers and directors.

NOTE: If the corporation includes in its name the words "engineer", "engineering", "surveyor", or "surveying", please contact the Louisiana Professional Engineering and Land Surveying Board prior to submitting the application for authority. They can be contacted at (225) 925-6291, 9643 Brookline Ave., Suite 121, Baton Rouge, LA 70809 (www.lapels.com).

Tom Schedler **Secretary of State**

APPLICATION FOR AUTHORITY TO TRANSACT BUSINESS IN LOUISIANA

(R.S. 12:304)



Foreign Corporation Enclose \$100.00 filing fee Make remittance payable to Secretary of State Do Not Send Cash

Return to: **Commercial Division**

P. O. Box 94125

Baton Rouge, LA 70804-9125 Phone (225) 925-4704 Web site: www.sos.la.gov

STATE OF	Check one:	() Non Profit () Business	Check one:	Original Application Amended Application
PARISH/COUNTY OF		() Business		() Amended Application
Corporation name:				_
0 P				
3. Principal office address in state or country of	f incorporation:			
Federal tax identification number:				
Principal business office address:				
PLEASE INC	CLUDE COMPLETE STR	EET ADDRESSES FO	OR THE FOLLOWI	NG
6. Principal business establishment in Louisiana	a:			
7. Registered office address in Louisiana:				
8. Registered agent's name and address in Lou				
Nature of business to be transacted in Louisi	iana:			
10. Names and addresses of directors and office	ers:			
To be signed by any officer				Title and Date
Sworn to and subscribed before me, the undersi	aned Notary Public. on thi	s date:		
	3			
	Notary			
AGENT'S ACCEPT	ANCE AND ACKNOWLE	DGEMENT OF APPO	INTMENT	
I hereby acknowledge and accept the appointment	ent of registered agent for	and on behalf of the a	above named corpo	ration.
	Registered Ag	ent		
Sworn to and subscribed before me on this date	:			
	Notary			
SS326 Rev. 09/11				